


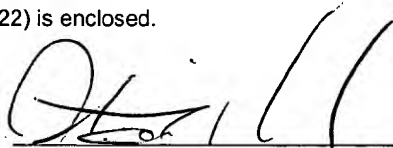
AF 2643 \$3

PTO/SB/31 (08-03)

Approved for use through 07/31/2006. OMB 0851-0031

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 47161-00016USPT	
	In re Application of: Miroslav Švajda <i>et al.</i>		
	Application Number: 09/970,399		Filed: October 3, 2001
	For Integrated Telecoil Amplifier With Signal Processing		
	Art Unit 2643	Examiner Suhan Ni	
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>330.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed. RECEIVED</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. JUL 15 2004</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. Technology Center 2600</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>10-0447</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>I am the</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><input type="checkbox"/> applicant /inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>48,733</u></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> </div> <div style="width: 45%; text-align: center;">  _____ Signature Justin D. Swindells _____ Typed or printed name (312) 425-3900 _____ Telephone number July 9, 2004 _____ Date </div> </div> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>			
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.			

07/14/2004 HALI11 00000003 09970399

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